

Position Description

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Division of Personnel Services.

CHECK ONE: ☒ NEW POSITION ☐ EXISTING POSITION

PART I - Items 1 through 12 to be completed by department head or personnel office.

1. Agency Name KANSAS DEPARTMENT OF AGRICULTURE		9. Position No. K	10. Budget Program Number 66140	Agency Number: 046
2. Employee Name (leave blank if position vacant)		11. Present Class Title (if existing position)		
3. Division Division of Food Safety and Lodging		12. Proposed Class Title Senior Administrative Assistant		Position Number:
4. Section Food Safety	5. Unit	For Use By Personnel Office	13. Allocation	
6. Location (address where employee works) City: County: Shawnee			14. Effective Date	
7. (Circle appropriate time) <input checked="" type="checkbox"/> Full time <input type="checkbox"/> Permanent <input type="checkbox"/> Inter. <input type="checkbox"/> Part time <input checked="" type="checkbox"/> Temporary <input type="checkbox"/> 100%			15. By Approved	
8. Regular hours of work: (circle appropriate time) FROM: 8:00 AM TO: 5:00 PM			16. Audit Date: By: Date: By:	
17. Audit Date: By: Date: By:				

PART II - To be completed by department head, personnel office or supervisor of the position.

18. If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position.

19. Who is the supervisor of this position? (Who assigns work, gives directions, answers questions and is directly in charge.)

Name	Title	Position Number
Steve Moris K0219464		Program Manager

Who evaluates the work of an incumbent in this position?

Name	Title	Position Number
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20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

Employee is allowed a great deal of latitude in completing work. General instructions and guidelines are given to the employee and flexibility is permitted in executing the duties. Assignments are given both verbally and in writing. Assignments vary from highly detailed to very general in nature.

21. Describe the work of this position using this page or one additional page only. (Use the following format for describing job duties:)

What is the action being done (use and action verb); to **whom or** what is the action directed (object of action): **why** is the action being done (be brief); how is the action being done (be brief). For each task state: Who reviews it? What is it reviewed for?

Number Each Task and Indicate Percent of Time	
1) 40%	Work involves assisting the program with administrative duties including but not limited to; making copies, tasking complaint and licensing information to staff, filing, creating folders, tracking of legal orders and other program information. Also assist with coordinating logistics for on and offsite training and travel.
2) 30%	Serve as a phone contact for the food safety program. Must have an understanding of the statutes governing the food safety program. Must be able to provide information regarding the food safety program. Will be receiving calls regarding food safety issues. Must be able to take accurate, detailed messages regarding calls.
3) 10%	Assist program staff with tracking and maintaining training records required by Human Resource and Program Standards requirements
4) 10%	Work with the program, stakeholders, and customers to improve communications by phone, email, and website content. And work with program in developing position specific procedure documentation to aide in continuity of operations and work planning
5) 10%	Assist with projects and duties for the program as needed. And perform other work as directed.

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22. a. If work involves leadership, supervisory, or management responsibilities, check the statement which best describes the position.
- () Lead worker assigns, trains, schedules, oversees, or reviews work of others.
 - () Plans, staffs, evaluates, and directs work of employees of a work unit.
 - () Delegates authority to carry out work of a unit to subordinate supervisors or managers.
- b. List the names, class titles, and position numbers of all persons who are supervised directly by employee on this position.

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23. Which statement best describes the results of error in action or decision of this employee?
- () Minimal property damage, minor injury, minor disruption of the flow of work.
 - (X) Moderate loss of time, injury, damage, or adverse impact on health and welfare of others.
 - () Major program failure, major property loss, or serious injury or incapacitation.
 - () Loss of life, disruption of operations of a major agency.

Please give examples.

Failure to perform effectively could permit regulated facilities to operate under conditions detrimental to the public's health and safety and allow adulterated foods or drugs to reach consumers.

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24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

For purposes of responding to specific questions or issues, the employee weekly is in contact with industry representatives, state inspection staff, local health officials, representative of FDA, other state officials, including law enforcement, and occasionally legislators.

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25. What hazards, risks or discomforts exist on the job or in the work environment?

Stakeholders may be confrontational. Office work may involve slip, trip, and fall hazards. Must routinely bend and stoop. Must routinely stand and/or sit for long periods of time.

26. List machines or equipment used regularly in the work of this position. Indicate the frequency with which they are used.

Personal computer, telephone, calculator, copier, scanner, fax machine.

PART II - To be completed by department head, personnel office or supervisor of the position.

27. List in the spaces below the minimum amounts of education and experience which you believe to be necessary for an employee to begin employment in this position.

Education - General

Education or Training – Special or Professional

Licenses, certificates and registrations

Valid driver's license.

Special knowledge, skills and abilities

Basic computer skills, above average spelling and typing skills necessary, strong oral and written communication skills, knowledge of regulations adopted and used by this program. Ability to communicate in a businesslike manner and maintain a pleasant and helpful attitude in dealing with others.

Experience – Length in years and kind

28. SPECIAL QUALIFICATIONS

State any additional qualifications for this position that are necessary either as a physical requirement of an incumbent on the job, a necessary special requirement, a bona fide occupational qualification (BFOQ) or other requirement that does not contradict the education and experience statement on the class specification. A special requirement must be listed here in order to obtain selective certification.

Signature of Employee

Date

Signature of Personnel Official

Date

Signature of Supervisor

Date

Signature of Agency Head or
Appointing Authority

Date